

County: Winnebago
 OSHKOSH MEDICAL & REHAB CENTER
 1850 BOWEN ST

Facility ID: 6690

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OSHKOSH 54901 Phone:(920) 233-4011
 Operated from 1/1 To 12/31 Days of Operation: 366
 Operate in Conjunction with Hospital? No
 Number of Beds Set Up and Staffed (12/31/04): 150
 Total Licensed Bed Capacity (12/31/04): 180
 Number of Residents on 12/31/04: 127

Ownership: Limited Liability Company
 Highest Level License: Skilled
 Operate in Conjunction with CBRF? No
 Title 18 (Medicare) Certified? Yes
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 138

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		48.8
Supp. Home Care-Personal Care	No	Developmental Disabilities	0.0	Under 65	5.5	1 - 4 Years		22.8
Supp. Home Care-Household Services	No	Mental Illness (Org./Psy)	27.6	65 - 74	14.2	More Than 4 Years		28.3
Day Services	No	Mental Illness (Other)	1.6	75 - 84	37.8			100.0
Respite Care	No	Alcohol & Other Drug Abuse	1.6	85 - 94	39.4	*****		
Adult Day Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	3.1	Full-Time Equivalent		
Adult Day Health Care	No	Cancer	3.1			Nursing Staff per 100 Residents		
Congregate Meals	No	Fractures	0.8		100.0	(12/31/04)		
Home Delivered Meals	No	Cardiovascular	14.2	65 & Over	94.5	-----		
Other Meals	No	Cerebrovascular	9.4			RNs		6.0
Transportation	No	Diabetes	7.9	Gender	%	LPNs		10.7
Referral Service	No	Respiratory	13.4			Nursing Assistants,		
Other Services	No	Other Medical Conditions	20.5	Male	32.3	Aides, & Orderlies		
Provide Day Programming for				Female	67.7			
Mentally Ill	No		100.0					
Provide Day Programming for								
Developmentally Disabled	No				100.0			

Method of Reimbursement

Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care		Managed Care						
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All
Int. Skilled Care	0	0.0	0	10	11.0	140	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	10	7.9
Skilled Care	18	100.0	320	73	80.2	120	0	0.0	0	18	100.0	170	0	0.0	0	0	0.0	0	109	85.8
Intermediate	---	---	---	7	7.7	100	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	7	5.5
Limited Care	---	---	---	1	1.1	86	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	0.8
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	18	100.0		91	100.0		0	0.0		18	100.0		0	0.0		0	0.0		127	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
Private Home/No Home Health	8.4	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/With Home Health	2.5	Bathing	1.6	71.7	26.8	127
Other Nursing Homes	0.8	Dressing	9.4	74.0	16.5	127
Acute Care Hospitals	83.2	Transferring	26.8	52.0	21.3	127
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	21.3	48.8	29.9	127
Rehabilitation Hospitals	2.9	Eating	40.9	51.2	7.9	127
Other Locations	2.1	*****				
Total Number of Admissions	238	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	3.9		Receiving Respiratory Care	5.5
Private Home/No Home Health	7.9	Occ/Freq. Incontinent of Bladder	44.9		Receiving Tracheostomy Care	1.6
Private Home/With Home Health	28.2	Occ/Freq. Incontinent of Bowel	29.1		Receiving Suctioning	1.6
Other Nursing Homes	4.5				Receiving Ostomy Care	2.4
Acute Care Hospitals	35.3	Mobility			Receiving Tube Feeding	0.8
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.0		Receiving Mechanically Altered Diets	11.8
Rehabilitation Hospitals	0.0					
Other Locations	3.0	Skin Care			Other Resident Characteristics	
Deaths	21.1	With Pressure Sores	2.4		Have Advance Directives	100.0
Total Number of Discharges		With Rashes	1.6		Medications	
(Including Deaths)	266				Receiving Psychoactive Drugs	55.1

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 100-199 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	76.7	88.5	0.87	90.2	0.85	90.5	0.85	88.8	0.86
Current Residents from In-County	89.8	80.0	1.12	82.9	1.08	82.4	1.09	77.4	1.16
Admissions from In-County, Still Residing	24.8	17.8	1.39	19.7	1.26	20.0	1.24	19.4	1.28
Admissions/Average Daily Census	172.5	184.7	0.93	169.5	1.02	156.2	1.10	146.5	1.18
Discharges/Average Daily Census	192.8	188.6	1.02	170.5	1.13	158.4	1.22	148.0	1.30
Discharges To Private Residence/Average Daily Census	69.6	86.2	0.81	77.4	0.90	72.4	0.96	66.9	1.04
Residents Receiving Skilled Care	93.7	95.3	0.98	95.4	0.98	94.7	0.99	89.9	1.04
Residents Aged 65 and Older	94.5	92.4	1.02	91.4	1.03	91.8	1.03	87.9	1.08
Title 19 (Medicaid) Funded Residents	71.7	62.9	1.14	62.5	1.15	62.7	1.14	66.1	1.08
Private Pay Funded Residents	14.2	20.3	0.70	21.7	0.65	23.3	0.61	20.6	0.69
Developmentally Disabled Residents	0.0	0.9	0.00	0.9	0.00	1.1	0.00	6.0	0.00
Mentally Ill Residents	29.1	31.7	0.92	36.8	0.79	37.3	0.78	33.6	0.87
General Medical Service Residents	20.5	21.2	0.97	19.6	1.04	20.4	1.00	21.1	0.97
Impaired ADL (Mean)	50.4	48.6	1.04	48.8	1.03	48.8	1.03	49.4	1.02
Psychological Problems	55.1	56.4	0.98	57.5	0.96	59.4	0.93	57.7	0.96
Nursing Care Required (Mean)	3.4	6.7	0.52	6.7	0.51	6.9	0.50	7.4	0.46